CHOICES...

A THREE-YEAR PLAN OF ACTION

FOR THE

GOVERNMENT OF THE NORTHWEST TERRITORIES

IN RESPONSE TO THE

RECOMMENDATIONS

OF THE

TASK FORCE REPORT ON SPOUSAL ASSAULT

Northwest Territories Canada

Tabled on February 14, 1986
Yellowknife
Northwest Territories

Final Report:
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Compliments of:

Women's Secretariat
Government of the N.W.T.
Box 1320
Yellowknife, N.W.T.
X1A 2L9

....DEFINITION....

SPOUSAL ASSAULT IS VIOLENCE, EITHER PHYSICAL OR PSYCHOLOGICAL, EXPRESSED BY A HUSBAND, WIFE OR LOVER TOWARDS HIS OR HER MATE.

INTRODUCTION

1. Background

Spousal assault is not unique to the Northwest Territories. Rather, it has increasingly become an issue of concern across Canada, and in fact throughout the western world.

While it is recognized that women are not the only victims of such assault, the numbers of male victims are insignificant in comparison with the number of women assaulted by their husbands. Factors which seem to contribute to this difference include the lack of economic independence of women, their traditional role as mother, homemaker and care-giver, and an unstated feeling in some social groups that a certain amount of aggression expressed by a man against his spouse is acceptable. For this reason we have focussed primarily on the battered woman.

A common corollary of spousal assault is child assault. Where violence in any form is recognized within a family as an acceptable form of family interaction, it tends to perpetuate itself in many forms.

Family violence tends to be a recurrent and self-perpetuating problem: offenders re-offend, and victims become accepting of violence, sometimes to the point of being unable to see other options or defend themselves. In addition, victims can sometimes become offenders, either in retaliation, or through lack of more adaptive coping mechanisms.

When considering the complexity of spousal assault, factors such as alcohol abuse, unemployment or poverty are frequently cited as being causes of the violence. While there is no doubt that such factors are frequently present when violence occurs, there is considerable evidence to suggest that they are corollaries to, rather than causes of, the abusive behaviour, and may in fact provide excuses.

Other factors which need to be considered when addressing the already complex issue of spousal assault in the North include the roles of husband and wife in the family structure and the desire in many communities to handle problems without outside "interference". Reports have been received from communities where social service workers, who have attempted to intervene in violent family situations, have come under

significant pressure from members of the community who perceive this intervention as breaking up the family. These issues must be understood and respected when planning any Territorial program.

The situation is a complex one which must be approached with sensitivity and compassion.

2. The Extent of the Problem

Statistics on the prevalence of spousal assault in the Northwest Territories are impossible to ascertain with any assurance, professional estimates tend to agree that the frequency of assaults in the North is at least as high as, and possibly significantly higher than, that of **one in four women** cited as a Canadian Statistic for rural areas.

Estimates are that only between 10 to 30% of assaults ever come to the attention of Social Services. Even in small communities many incidents can go unreported for a significant length of time. In some communities there is a total lack of willingness to even acknowledge publicly the existence of assaultive behaviour.

Further, social workers have reported that although the incidence of women directly seeking assistance because of assault is low, the number of women for whom violence is simply part of their every day life is significantly higher. Many women are so demoralized, or afraid, that they are simply unable to leave their abusive spouse.

3. Conclusion

Spousal assault is a disturbing and complex problem. It appears to be endemic throughout the North yet is often, deliberately or inadvertently, "ignored".

It is a problem which has connections with a multiplicity of other problems - alcohol abuse, unemployment, social disintegration, alienation from traditional values, poverty, and others, so cannot be isolated from them. Yet it is a problem which needs to be addressed directly and from many directions.

These directions include education in family life; legal sanctions against offenders; heightening of community awareness and understanding; training for professionals and community volunteers; and the development of counselling and other intervention programs.

The problem is of such complexity that it requires a concerted effort by Government departments, community organizations and concerned professionals and lay-people. Only through such concerted effort is positive change likely to result.

If any single factor is to be emphasized it must be the need for re-development of awareness, and of a desire to act, on the part of community members. Only once the community feels "ownership" of the problem and potential solutions, only when they see the source of the problem and its remedies as lying within their mandate is positive, long-term change is likely to result. It is essential that communities retain their integrity and independence as far as is possible if individual members, in their turn, are to retain their personal integrity and feeling of worth.

An action-oriented commitment from the Government is essential if any progress is to be made in mitigating the effects of this tragic social problem.

4. Development of the Action Plan

Initiated by the Department of Social Services, an Interdepartmental Working Group, was established. This group developed the Interagency Referral Protocol and prepared the first of an Action Plan. This was then submitted to the Ministerial Committee for review.

The present Plan, while recognizing the need for a comprehensive approach to the problems of family violence and other community mental health issues, nevertheless focusses on Spousal Assault Initiatives though the mandate given by Executive Council.

Statement of Principles

The following principles provide the basis for development of the Action Plan.

- Family violence is not an acceptable form of behaviour.
- Safety and assistance must be available for those suffering from or threatened with violence. Services must be directed towards preventing abuse and fostering happy and healthy family life styles.
- Programs and services should be provided which will encourage and enable families and communities to help themselves and wherever possible they will be community based.
- Counselling and rehabilitation of the batterer is an important consideration for the potential reconciliation of the family.

6. Timing

The Action Plan outlines activity to be initiated in the three years between 1986-89.

7. Financial Implications

Costs for 1985/86, other than identified priority funding ($200,000) are minimal and have been absorbed in Departmental budgets.

Significant costs will be increased in 1986/87 if a serious attempt to mitigate the effects of spousal assault is to be made.

	1986/87	1987/88	1988/89
Public Information	81,000	79,000	30,000
Family Life Education/Counselling	225,000	225,000	
Safe Shelters	1,200,000	1,100,000	
Community Action Groups	155,000	155,000	155,000
Counselling for Batterers	150,000	100,000	100,000
Social Services: Training/Policy/ Program Development	125,000	140,000	90,000
	$1,936,000	$1,799,000	$375,000

This does not include money already identified within Social Services Main Estimates for Social Assistance currently provided and projected for operation of the Baffin Crisis Shelter.

IMPLEMENTATION OF RECOMMENDATIONS

Proposal

That the Ministerial Committee continue to monitor and facilitate the implementation of the action items identified in this Plan. The committee will prepare an annual report on the progress of the action items for the Minister Responsible for the Status of Women and it will be tabled annually for the next three years.

PART I

RESPONSES TO THE RECOMMENDATIONS OF THE TASK FORCE ON SPOUSAL ASSAULT

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **Information and Education**		
1. Develop, produce (translate where possible) and distribute information/educational and public awareness materials, pamphlets, posters, handbooks, TV and radio spots. Materials are needed for the general public (awareness); spousal assault victims and offenders; community action groups and offenders; community action groups and volunteer workers; councils and schools; nurses, social workers; RCMP and court workers. (See pgs. 17, 54-57, 87)	The Dept. of Culture & Communications has developed a plan for the implementation of a comprehensive Public Education program consisting of: - Information Kit, - Radio Information Package; - Spousal Assault Drama Project, and - Newsletter. COSTS: 1986/87: $81,000 1987/88: $79,000 1988/89: $30,000	Culture & Communications
2. Provide information (posters, pamphlets) on rights of victims of spousal assault and assistance available to them. Be aware of current community resources available (such as safe shelter). (See pg. 17)	Health & Welfare Canada, RCMP, Social Services, Justice will be developing pamphlets in conjunction with Culture & Communications as part of the Interagency Referral System. This cost will be absorbed by the Dept. of Social Services. See Issue Paper #1 "Public Information"	
3. Collect, catalogue and distribute information available throughout North America on spousal assault for interested northern agencies, etc. (See pg. 58)	The Women's Secretariat has established a library of resources including material collected by the Task Force, Government and private publications. These materials are catalogued and distributed to libraries or other government departments as appropriate. A central catalogue is maintained by the Secretariat.	Women's Secretariate, GNWT and Public Libraries
4. Ensure that the published materials collected by the Task Force are catalogued and available through the library system. (See pg. 58)		

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **Information and Education** - Continued		
5. Develop alcohol and drug awareness curriculum and family life curriculum for schools. (See pgs. 41-42, 54)	The Dept. of Education, in conjunction with the Dept. of Health, is currently developing a family life education curriculum for the Northwest Territories schools as part of the entire School Health Program. The Alcohol and Drug Awareness Program is already being piloted in schools across the NWT. Prior to introduction of Family Life Education in the classroom, there will be a teacher orientation program to familiarize teachers with sensitive materials as well as public information sessions, and pilot teaching projects to refine and adapt materials as necessary. (See Recommendation 16)	Health Education
Medical Attention		
6. That apparent victims of spousal assault be given immediate medical attention. (See pg. 18.)	As specified in the Interagency Referral System/Protocol, victims of spousal assault will be taken immediately to the hospital or nursing station for medical attention prior to the initiation of any other action. Anticipated costs of implementing the Interagency Referral System/Protocol are minimal and are already within Social Services O & M.	Health & Welfare Canada, Social Services

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS		
Access to Other Assistance		
7. Lead the development of a coordinated interagency referral system, and include alcohol and drug workers. (See pgs. 40-41.)	Initiated by the Department of Social Services an Interagency Referral System has been established and agreed to by RCMP, Health & Welfare Canada and Territorial Departments of Health and Social Services.	Social Services, Health & Welfare Canada, RCMP, Health
8. Participate in an interagency approach to assist victims of spousal assault. (See pgs. 19, 39, 54.)	See Issue Paper #3 "Interagency Referral System"	
9. Review requirements for social assistance and exercise flexibility and lenience for victims and families in transition. Provide social assistance for victims and families in transition. (See pg. 33)	Spousal assault victims and their families currently can obtain client assistance under the Social Assistance Program. Revised regulations ensure that this will be done automatically if the family is in crisis. Transportation is provided as part of this assistance if temporary relocation is required.	Social Services
10. Fund transportation costs of victims to shelters and day-care costs, where necessary. (See pgs. 20, 33)		
Shelter and Protection		
11. Assist victims in finding immediate safe shelter where needed. (See Pg. 20)	The RCMP is prepared to comply with this approach. This will be done through the Policy Centre of the Officer in Charge, Criminal Investigation Branch, Northwest Territories.	RCMP
12. Give spousal assault victims priority for housing and day-care, where required. (See Pg. 21)	Rental housing under the northern, rental and public housing programs is generally not available for emergency use such as transition housing. Housing, however, could be released for such use on a permanent basis.	Social Services, NWTHC

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **Shelter and Protection** - Continued	The NWT Housing Corporation will approve the rental of a larger house to a family (over accommodate them) sponsored by the Department of Social Services or an approved society to provide transition accommodation in a community. The Department of Social Services will work with the Housing Corporation to assure a co-ordinated response. In Yellowknife, the NWT Housing Corporation is willing to establish a unit at Lanky Court and offer a lease at economic rent. It will also assist in the planning and construction of house(s) if the capital is provided through the Department of Social Services. Housing will be considered on a case-by-case basis.	
13. Provide alternatives for shelter for spousal assault victims. Fund new pilot shelters in communities demonstrating commitment, using existing buildings where possible. (See pgs. 21, 29, 30, 31, 32)	There should be temporary shelter available for spousal assault victims and their families. It is preferable if run by community-based groups to ensure that the shelter meets the communities' needs.	Social Services
14. Fund the operating costs of existing shelters. (Sappujjijit Friendship Centre in Rankin Inlet, Katimavik Centre in Cambridge Bay, YWCA in Yellowknife and the Crisis centre in Fort Smith.) (See pg. 31)	Social Services is developing a departmental policy which will look at various shelter options including funding existing shelters, setting up new shelters and paying families to provide shelters.	

RECOMMENDATION AID TO VICTIMS **Shelter and Protection** - Continued	ACTION	DEPARTMENT(S) RESPONSIBLE
	Social Services will ensure that counselling services are provided. "Safe Homes" will be identified in all communities providing a single room in communities with populations under 500 and two rooms in communities with populations over 500. A retainer of $900/year would be paid with a per diem rate of $30 and an estimated occupancy rate of 25 percent. "Transition Houses" in the major centres will also be required. Projected Costs (Approximate): 1986/87: $1,200,000 1987/88: $1,100,000 See Issue Paper #4 "Safe Shelters"	
15. Continue to provide physical protection to victims, consider all complaints as serious and advise victims that batterers should be prosecuted. (See pgs. 19, 20)	The RCMP is prepared to comply with this approach. This will be done through the Policy Centre of the Officer in Charge, Criminal Investigation Branch, Northwest Territories.	RCMP
Counselling		
16. Provide for professional Family Life Education Consultants to support victims of spousal assault, their families and offenders through training and advice to nurses, social workers, court workers, RCMP, community groups, volunteers and lay counsellors, and schools. (See pgs. 18, 37)	The Department currently employs a Coordinator of Family Life Education who acts in a consulting/advisory capacity to all groups/departments wishing information on family life topics.	Health

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **Counselling** - Continued		
	Three additional Family Life Education Consultants will report to the Coordinator, and provide regional coverage at a community level to increase knowledge and skills of both public and professionals trying to assist and support victims of violence. Human sexuality, communication skills, parenting, decision-making and values indentification instruction provide the key to healthy lifestyles and responsibility - the basis of family violence prevention. Sensitivity to and awareness of cultural concerns will be central to the effectiveness of this program. Two years of intensive education by these consultants should provide a firm community base for continued action against family violence. COSTS: 1986/87: $225,000 1987/88: $225,000 Future needs to be evaluated. See Issue Paper #2 "Family Life Education"	
17. Provide for crisis lines in conjunction with NWTel on a regional community basis. Fund space, telephone installation, rental and long distance charges. (Line to be operated by trained volunteers.) (See pgs. 22, 26)	Crisis lines are <u>not</u> recommended. This would represent a duplication of services provided by the Mental Health Association and has not proven effective. Information will be pro-	Social Services, Health

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **Counselling** - Continued		
	provided by the Women's Secretariat regarding Federal grants which may be available to individual communities or regions requiring such a service.	
18. Extend counselling to victims provided by professionals by telephone. (See pg. 24)	However, a 24 hour emergency telephone number in each community is being provided and included in the Public Information Newsletter.	
Direction & Assistance to Community Agencies		
19. Foster development of community action groups, volunteers to support victim, and development of lay counsellors involving respected elders of communities. (See pgs. 18, 22, 25-27, 34, 54-55)	Solutions to the spousal assault problem must be community-based, taking advantage of the resources already in the community. Social Services will act in an advisory capacity and will take the initiative in forming community-based groups. Contribution funding should be made available through Social Services. COSTS: 1986/87: $155,000 1987/88: $155,000 1988/89: $155,000 See Issue Paper #5 "Community Action Groups"	Social Services,
Treatment and Assistance for Batterers		
20. Review legal aid plan to permit legal aid defence counsel to assist clients (batterers) get treatment and counselling. (See pg. 35)	Legal Aid will ensure that lawyers are made aware of counselling and treatment services for batterers. It is assumed defence counsel will recommend these services to clients.	Justice

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **Treatment and Assistance for Batterers** - Continued		
21. Assess needs of convicted batterers for rehabilitation. Provide anger control therapy and counselling services. Consider anger control therapy as a sentencing option. (See pgs. 35, 49)	It is necessary to determine whether being convicted is enough of a deterrent for the batterer or if there is a need for further rehabilitation outside of the correctional facility. A pilot project examining this and the effectiveness of anger control therapy will be conducted. COSTS: 1986/87: $150,000 1987/88: $100,000* 1988/89: $100,000* * Costs are estimates and will be more readily determined on completion of assessment project in 1986/87. See Issue Paper #6 "Counselling for Batterers"	Social Services
Direction & Support for Government Agents **Social Workers**		
22. Develop departmental policy and procedures for providing services to spousal assault victims and families, ensuring coordination with other agencies involved. (See Pgs. 37, 38)	The Department of Social Services is developing departmental policy and procedures with regard to spousal assault to ensure that victims and families receive a consistent level of assistance across the Northwest Territories. Part of this consistency involves being aware of and coordinating with other agencies in each community.	Social Services
23. Clarify social workers' duties and responsibilities under present law, and develop in-service training workshops to prepare workers for spousal assault cases. (See pgs. 26, 36, 39-40)		

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **Direction & Support for Government Agents** **Social Workers** - Continued		
	The protocol outlining the role of social service workers in connection with other agencies has been developed. (See response to recommendations 7&8) COSTS: 1987/87: $125,000 1987/88: $140,000* 1988/89: $ 90,000* * Preliminary Estimates See Issue Paper #7 "Social Services Policy/Program Development"	
24. Enhance Social Worker Program at Thebacha College to include training in family violence cases. (See pg. 26)	This matter has been addressed and will be followed up with further recommendations to the Board of Governers of Thebacha College. The Department of Education indicates that, while the curriculum for the Social Workers Program at Thebacha College does not have a specific course in family violence, many of the courses in the program do deal with family violence. The Department of Health, through the Family Life Education Consultants is also prepared to assist in enhancing the existing program.	Education, Social Services, Health

RECOMMENDATION	ACTION	DEPARTMENT(S)
AID TO VICTIMS		
25. Give priority to native social workers who apply for education leave or assistance to improve their qualifications. (See pg. 36)	This matter is being referred to the Interdepartmental Staff Development Committee. Native social workers do currently receive first priority in receiving educational leave.	Education
Medical Care Professionals		
26. Develop procedures and protocols for the management and documentation of spousal assault cases. (See pgs. 51, 53)	The Department of Health, RCMP, Social Services and Health and Welfare have already agreed to an interagency protocol referral system. The recommendation will involve participation by field staff as well as cooperation with other agencies in order to create procedures and protocols which can be applied across the Northwest Territories.	Health & Welfare, Medical Services, Justice Canada, RCMP, Health
Agents of the Law Judges/Prosecutors		
27. That the Commissioner of the NWT and the Federal Minister of Justice consider appointment of women to judicial office and assignment of women to positions as crown attorneys. (See pg. 47)	There are currently 3 (of 6) female prosecutors.	Justice Canada, Commissioner of the NWT

RECOMMENDATION	ACTION	DEPARTMENT(S)
AID TO VICTIMS **Judges/Prosecutors** - Continued		
28. When dealing with applications for peace bonds, bail review and sentencing of batterers, note the right of victims to remain in their own homes and communities. (See pg. 21)	Judges may order a batterer not to communicate or harass a victim by issuing a restraining order. The batterer is in civil contempt if he/she does not abide by this order, however, there may be no RCMP in the community to enforce the order and the batterer's spouse may allow the offender back in the house. Community agencies/social workers will ensure that victims are informed of their rights and told that if their spouse has been issued a restraining order he/she does not have to be allowed back into the home. They will also help the victim develop an escape plan where the batterer ignores the order.	Justice Canada
29. Hold judicial interim release hearings in appropriate spousal assault cases. (See pg. 45) 30. Consider whether sentences act as a general deterrent to the public or a specific deterrent to the individual. (See pg. 48)	As the public/government cannot be seen to be influencing the decision of judges, these matters must be left to the discretion of the judiciary.	Justice Canada, Justice
32. Ensure that crown prosecutors have been trained for spousal assault cases and that they	To the extent possible this is presently done: Crown Prosecutors do	Justice Canada

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **Agents of the Law** **Court Workers** - Continued		
consult with professionals and community when determining whether to lay a charge in a spousal assault case and that, where prosecutors have special interests and aptitudes, spousal assault cases be assigned to them. (See pgs. 46, 47)	attend training seminars. However, with the current demands on the system specific prosecutors cannot normally be designated for spousal assault cases.	
33. Provide training for prosecutors in the NWT.		
Court Workers		
34. Provide for professional or lay advocates to advise victims and provide support during court proceedings. (See pgs. 27, 48)	Under existing law the victims advocate is the prosecutor. In civil matters, Legal Aid provides lawyers for restraining orders, maintenance and division of property. Information for victims will be available through community agencies and professionals. See Issue Paper #1 "Public Information"	Justice
Justice & Public Services		
35. Provide for courtworkers to respond to victims' enquiries and consider enhancing duties of courtworkers to include acting as an intermediary and advocate for victims. (See pg. 27)	The current role of courtworkers is to assist in the advocacy process. They provide a referral service but do not act as social workers/counsellors. Federal funding for the courtworkers' program does not allow them to act as an advocate for the victim.	

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **Agents of the Law** **Justice & Public Services** - Continued	The Department of Justice and Public Services will encourage the preservation of the current role of courtworker.	
36. Review legislation and prepare a draft ordinance on spousal assault. (See pg. 28)	In Canada, assault is considered an offence under the Federal Criminal Code and is not within the jurisdiction of the Northwest Territories. Therefore, there is no initiative at present for Justice to prepare legislation dealing directly with spousal assault. The Department of Justice is reviewing legislation on family law. Issues being considered include: (a) property sharing and division of property upon marriage breakdown; (b) spousal support obligations; (c) child support obligations; (d) restraining orders to prevent asset waste; (e) restraining orders to prevent harassment; (f) provisions for exclusive possession of a matrimonial home in certain circumstances; (g) separation agreements.	Justice

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **Justice and Public Services** - Continued		
37. Review and consider amending Mental Health Ordinance (through consultation) to permit batterers with suspected psychological problems to be committed for mental examination. (See pg. 52).	There needs to be some mechanism to allow batterers with suspected psychological problems to be committed for mental examination, both for the protection of themselves and their victims and families. The Mental Health Act was amended at the 1985 second session of the Legislative Assembly. This recommendation was considered before the Act was passed. Although there is no specific provision dealing with batterers, the Department of Health believes that the provisions for non-voluntary committal are sufficient to include a perpetrator of spousal assault "with suspected psychological problems". This is justifiable only when a person is in a state to be a danger to himself or to others. Under any other circumstances, the deprivation of personal liberty under involuntary committal would constitute an infringement on that person's liberty and civil rights under the Charter of Rights.	Justice, Health

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **Justice & Public Services** - Continued		
	The Department of Justice supports this position.	
RCMP		
38. That the Commissioner of the RCMP consider assignment of women to "G" division positions in the RCMP. (See pg. 47)	Women members of the RCMP have been, and are, serving in the Northwest Territories.	RCMP
39. Explore diversion for batterers who might otherwise be prosecuted in courts where appropriate. (See pg. 45) 40. Review the policy allowing RCMP to lay charges in spousal assault cases and continue to lay charges in as many cases as possible. (See pg. 44)	The Minister of Justice Canada and the Solicitor General of Canada has ordered that charges be laid by the police if there is sufficient evidence to support such charges. RCMP policy states in part "lay a charge when you have reasonable and probable grounds to believe an assault has occurred". Diversion as an alternative may be explored at the discretion of the RCMP and prosecutor.	RCMP
41. Consult with other professionals in community in spousal assault cases. (See pg. 46).	The RCMP have agreed to this recommendation and support the Interagency Referral System. See Issue Paper #3 "Interagency Referral System"	RCMP

RECOMMENDATION	ACTION	DEPARTMENT(S) RESPONSIBLE
AID TO VICTIMS **RCMP** - Continued		
42. Provide special training to recruits and In-Service training on spousal assault investigation and case preparation. (See pg. 46).	Training for recruits in domestic disputes/violence/child abuse has been on-going in the Training Academy in Regina since the mid-1970's. Some of this training takes the form of professional actors from Regina Globe Theatre Productions creating and acting out different types of domestic encounters.	RCMP
43. Take statements from household members witnessing spousal assault. (See pg. 44)	Investigations into complaints of assault are conducted and charges are to be laid according to RCMP policy when supported by evidence, which includes statements from household members.	RCMP

TOTAL FINANCIAL IMPLICATIONS:

ISSUE PAPER	1986/87	1987/88	1988/89	TOTAL
#1 - Public Information	81,000	79,000	30,000	190,000
#2 - Family Life Education	225,000	225,000	0	450,000
#3 - Interagency Referral System	0	0	0	0
#4 - Safe Shelters	1,200,000	1,100,000	0	* 2,300,000
#5 - Community Action Groups	155,000	155,000	155,000	465,000
#6 - Counselling for Batterers	150,000	100,000	100,000	* 350,000
#7 - Social Services Policy/ Program Development	125,000	140,000	90,000	* 355,000
	1,936,000	1,799,000	375,000	4,110,000

* These items are 50/50 cost-shareable under the Canada Assistance Plan (CAP), Health & Welfare Canada, except for capital. Capital is not cost-shared by the Federal Government.

1986/87 Costs approved by the Legislative Assembly, February, 1986.

The estimates for 1987-89 are being recommended by the Ministerial Committee and will be considered by the Government of the Northwest Territories, but have not yet been approved.

PART II

ISSUE PAPERS

ISSUE PAPER: PUBLIC INFORMATION

Background: There appears to be a widespread lack of knowledge concerning both spousal assault and what to do about it. Part of the problem results from a natural reluctance to discuss such a sensitive issue, but it is compounded by the lack of available information.

Further, in many communities there appears to be a general acceptance of family violence as a "normal" form of behaviour. This air of acceptability within a community makes productive intervention or amelioration of the problem virtually impossible.

Public education is essential if this attitude to spousal assault as an acceptable form of behaviour, is to be changed.

Public education is required on several different levels:

° What is spousal assault, why it occurs, and how prevalent is it?

° What can be done to reduce the incidence?

° What can be done by a victim - options available, support services, etc.?

In response to recommendations made by the Task Force on Spousal Assault, the Department of Culture and Communications, as part of the Interdepartmental Committee prepared a comprehensive plan for providing public information on Spousal Assault designed to:

- Increase public understanding of spousal assault;
- Create a desire, in both individuals and communities, to do something about it;
- Assist individuals and communities to take action.

Action Plan #1: Spousal Assault Information Kit:

To produce a kit of print materials (in English and native languages) that would include:

- fact sheets describing the problem;
- a pamphlet on services currently available to victims of battering in the NWT, including legal options;
- a pamphlet on sources of funding and other assistance currently available to communities;

- a booklet on battering from the batterer's point of view: what is known about why certain men batter; what help is available;
- a pamphlet on spousal assault from the children's point of view: what impact will it likely have on them; when the parents are violent to one another are the children likely to be beaten?; etc.;

The kit would be accompanied by posters on the theme "You Do Have A Choice".

Rationale:

The Task Force points to a need for information for victims and for professionals who deal with them and their families. It is crucial that this be provided in English and native languages and that the information be appropriate to the North.

Method of Implementation:

The kit would be developed by the Department of Culture and Communications in consultation with the Family Life Education Consultants in the Department of Health, SAFA, the Baffin Regional Aqvvik Society, the YWCA, the health liaison officer for the Dene Nation, the youth project coordinator for ITC, Native Courtworkers, Maliiganik Tukisiiniakvik, Family Counselling and other interested parties.

Individual pamphlets and complete kits would be distributed through nursing stations, hospitals, RCMP detachments, social services offices, band councils, hamlet and settlement councils, as well as other community centres.

The materials would also be advertised on radio and TV, including native language broadcasting services.

Department Responsible:

Department of Culture and Communications

Individual items would be distributed when completed. The complete kit would be available by the end of 1986.

Financial Implications:

	1986/87	1987/88	1988/89
Print Materials	18,000	0	2,000
Radio and TV spots (annually)	15,000	15,000	15,000

Action Plan #2: Spousal Assault Radio Information Package

To produce radio programs in English, Inuktitut and the Dene languages that offer the same information as the print materials.

Rationale:

Radio is the single, best means of communication in the North at the moment and the only public medium that reaches many native people.

Method of Implementation:

Judging from the response to similar proposals in the past, these programs could likely be broadcast through cooperation with CBC Northern Service and the Native Communications Societies. They would also be made available to community groups for use on community radio stations.

Department Responsible:

Department of Culture and Communications

Financial Implications:

	1986/87	1987/88	1988/89
Radio Info Package	0	11,000	0

Action Plan #3: Spousal Assault Drama Project

To develop and produce an original, hour-long drama about spousal assault, involving acting, music and interaction with the audience.

To investigate the possibility of the co-production of a film between the Department of Culture and Communications and the National Film Board, based on this production. This production would be made available in English, the Dene languages and Inuktitut.

A playscript would also be produced, for community use.

Rationale:

Developing and touring a play would help us make spousal assault a public, community issue rather than a hidden, personal tragedy. We could hope to reach people who might not otherwise be brought into the discussion.

By presenting a realistic story - one based on the experience of Northern men and women - we could help people to look realistically at what is going on around them.

We could help people feel the pain of both victims and batterers; we could suggest ways out.

A play would permit us to reach deep into the community and to make spousal assault an issue that demands action.

The Task Force, perhaps aware of the successful use of similar techniques elsewhere, recommended drama be used in public education.

Method of Implementation:

The play would be developed in 1986-87 and toured that year; it would be revived and taken to other communities in 1987-88. Over 40 communities would be visited.

The actors would be trained to facilitate group discussions following the performance.

A full range of print materials would be made available at the performances, together with a list of "follow-up" activities for individuals and agencies in the community.

Department Responsible:

Department of Culture and Communications

Financial Implications:

	1986/87	1987/88
Drama Project	35,000	25,000
Video Project		20,000

Action Plan #4: Spousal Assault Newsletter

To produce a quarterly or bi-monthly newsletter focussing on action being taken in communities throughout the NWT to prevent spousal assault or provide services to victims; announcements of conferences; research results; government initiatives, etc.

Rationale:

It is important that there be a link between communities so they can learn from one another's initiatives.

Method of Implementation:

This project would involve developing community contacts and a mailing list, collecting the "news", producing the newsletter and distributing it.

The newsletter would be produced on contract by an interested individual or community group.

Department Responsible:

Department of Culture and Communications

Financial Implications:

	1986/87	1987/88	1988/89
Newsletter	8,000	8,000	8,000

Action Plan #5: Special Projects

To provide support to other agencies that request assistance with public Culture and Communications projects, in order to meet local needs or supplement the work undertaken by the Department of Culture and Communications.

Rationale:

While the Government has a responsibility to provide information about its own programs and can prevent duplication of effort by acting as a central source of general information, there is a need for local materials and non-governmental initiatives.

Method of Implementation:

Upon request, the Department would provide editorial, translation and production assistance to community action groups, as resources permitted. The Department would also be available to assist journalists in planning and researching items on spousal assault.

Department Responsible:

Department of Culture and Communications

Financial Implications:

Department of Culture and Communications: Provision of Services, 1986 - Ongoing

Action Plan #6: Evaluation

To gauge the success of the project in meeting its objectives of education, motivation and action.

Rationale:

The need to assess what has been done is obvious, especially if the process is to continue beyond the three years of this plan.

The focus for the next phase (beginning 1988 or whenever basic services are in place) should be prevention.

Method of Implementation:

To gauge the success of the project in informing the public about spousal assault and in changing key attitudes, a before-and-after questionnaire survey would be run in sample communities.

To gauge the impact on community action, an informal tally would be made now and at the end of the project to determine the number of communities with remedial/rescue services for people in violent relationships.

To assess the usefulness of specific media produced by the project (eg: print materials, dramatic production), users would be invited to fill in questionnaires.

Department Responsible:

Department of Culture and Communications

Financial Implications:

	1986/87	1987/88	1988/89
Evaluation	5,000	0	5,000

Health and Welfare Canada, RCMP Detachments and Social Services Offices will distribute information produced or purchased and made available by other agencies.

TOTAL FINANCIAL IMPLICATIONS:

DEPT. OF CULTURE & COMMUNICATION	1986/87	1987/88	1988/89	TOTAL
1. Information Kit - print	18,000	0	2,000	
- radio/TV	15,000	15,000	15,000	
2. Radio Information Package	0	11,000	0	
3. Drama Project	35,000	45,000	Unknown	
4. Newsletter	8,000	8,000	8,000	
5. Special Projects	0	0	0	
6. Evaluation	5,000	0	5,000	
	81,000	79,000	30,000	190,000

ISSUE PAPER: FAMILY LIFE EDUCATION

Background: The availability of early, positive, factual information regarding human interaction, self-concept, respect and sexual roles, and the teaching of healthy coping skills was identified as a critical need in order to provide preventive education for spousal assault and other family violence.

Action Plan:

The NWT School Health Curriculum will set the framework for family life instruction in schools. A school health survey has indicated two major areas of concern:

A. WHO will teach the program.
B. Need of background information for instructors.

As well, two other problems seem evident:

C. Most of the adult population have never benefited from such instruction.
D. The School Health Program will not be mandatory, but may be accepted or rejected in part or in whole by local education authorities.

Family Life Education Consultants will serve three main functions:

1. To heighten public awareness and increase acceptance of School Health Promotion topics and education adults as well as their children, through community workshops, use of the media, etc.

2. Act as a resource person/guest teacher to augment the teaching of the Family Life Program in schools.

3. Liaise or coordinate activities/services between groups involved with spousal assault, parenting, and other family concerns (eg: suicide prevention).

Method of Implementation:

The Department of Health employs a Coordinator of Family Life Education, who acts in a consulting/advisory capacity to all groups/departments wishing information on Family Life topics. Requests for such assistance have trebled over the last year, and will undoubtedly multiply in direct proportion to the media coverage and public awareness campaign on Spousal Assault and other Family Violence issues.

Three additional Family Life Education Consultants will report to the Coordinator, and provide regional coverage at a community level to increase knowledge and skills of both public and professionals trying to assist and support victims of violence.

Human sexuality, communication skills, parenting, decision-making and values identification instruction provide the key to healthy lifestyles and responsibility - the basis of family violence prevention.

Sensitivity to and awareness of cultural concerns will be central to the effectiveness of this program. Two years of intensive education by these consultants should provide a firm community base for continued action against family violence.

Department Responsible:

Department of Health and Department of Education share responsibility for the school health curriculum. The Family Life Education Consultants will operate under the Department of Health.

Financial Implications:

1986/87	1987/88	1988/89
225,000	225,000	

TOTAL: $450,000

* Future needs to be evaluated

ISSUE PAPER: INTERAGENCY REFERRAL SYSTEM

Background: Following the Task Force Report the Executive Council recommended that the Department of Social Services, through the working committee on spousal assault, develop a co-ordinated interagency referral system to begin to address the needs of spousal assault victims and their families.

It was emphasized that action to reduce spousal assault must be generated from, and co-ordinated at, a community level.

Action Plan:

The protocol was developed and approved by the government agencies immediately involved in dealing with victims of spousal assault.

Information on what each agency can do is being produced in pamphlet form. These pamphlets will also provide listings of telephone numbers which can be reached on a 24 hour basis. These pamphlets will be available for distribution by the end of the year.

Regional Superintendents of Social Services have been given the lead role in convening meetings in each community:

(a) of professionals - to review each others' services;
(b) between professionals and community Councils to review what is available in the community and co-ordinate services.

Professionals to be involved in this process will vary form community to community, but will generally include: nurses, RCMP offices, community Social Service Workers, Clergy, Teachers/Adult Educators, doctors, psychologists, etc.

Financial Implications:

Anticipated costs will be absorbed by the Department of Social Services for a total of $4,000 over 3 years.

Protocol:

The Department of Social Services, Department of Health, Health and Welfare Canada and the Royal Canadian Mounted Police have created and agreed upon the following protocol. The protocol details the steps which will be taken by the various agencies in different spousal assault scenarios. The services provided by the agencies are also listed.

The information on help available for victims is being created in pamphlet form by the Department of Social Services. The pamphlet is xeroxable and includes space for local information. Because the local information will be typed in and xeroxed, it can be easily changed.

Scenario A - Battered Spouse Report to the RCMP

1. RCMP will, subject to the victim's wishes, take person with visible signs of battering and in need of medical care to the nursing station or hospital.

2. RCMP, for the purposes of keeping the peace if necessary, will stay in the nursing station or hospital but need not remain with the victim while he/she is receiving medical attention.

3. Nursing station or hospital staff will provide any necessary medical treatment.

4. RCMP will take statement and look for supporting evidence. If the victim refuses to assist, the RCMP will investigate for other supporting evidence.

5. RCMP will provide victim with information leaflet detailing the available resources in the community.

6. RCMP will make a referral to one of the community agencies if the victim wishes.

Scenario B - Home Disturbance - RCMP Called

1. RCMP will go to the home.

2. Once lawfully in the home, RCMP may arrest without a warrant based on the evidence, regardless of victim's wishes.

3. If medical treatment is necessary, RCMP will refer the victim to the hospital or nursing station. Medical-Nursing staff will provide necessary treatment.

4. RCMP will conduct an investigation.

5. RCMP will provide victim with information leaflet detailing the available resource of the agencies in the communities.

6. RCMP will make a referral to one of the community agencies if the victim wishes.

Scenario C - Battered Spouse to Nursing Station or Hospital

1. Medical treatment is given to the victim.

2. RCMP is called:
   (a) if the victim wishes so,
   (b) if the nurse/doctor decides the RCMP involvement is warranted, or
   (c) if protection is required.

3. If called, RCMP will investigate.

4. Medical-Nursing staff will provide victim with an information leaflet detailing the available resources of the agencies in the community.

5. Medical-Nursing staff will refer victim to one of the community agencies if the victim wishes.

Scenario D - Relative or Friend Reports Spousal Assault to the Nursing Station/Hospital

1. Relative or friend provided with an information leaflet detailing the available resources of the agencies in the community.

2. Relative or friend may be asked to bring the victim to the nursing station/hospital if medical treatment is needed.

3. Nursing Station/Hospital will refer the relative or friend to one of the community agencies if the relative or friend wishes.

Scenario E - Battered Spouse Reports to Social Services

1. Victim is referred to nursing station/hospital if medical treatment is needed.

2. Victim is referred to RCMP:
   (a) if the victim wishes, or
   (b) if the social worker decides that RCMP involvement is warranted, or
   (c) if protection is required.

3. Social Services reviews the needs of the victim (money, housing, children) and ways Social Services can assist.

4. Social Services will provide the victim with an information leaflet detailing the available resources of the agencies in the community.

5. Social Services will refer the victim to one of the community agencies if the victim wishes.

Scenario F - Relative or Friend Reports Spousal Assault to Social Services

1. Social Services may do a home visit.

2. Relative or friend will be provided with an information leaflet detailing the resources of the agencies in the community.

3. If medical treatment for the victims is needed, the relative or friend may be asked to bring the victim to nursing station or hospital.

4. Relative or friend will be advised to report to RCMP if needs are so determined.

5. Social Services will refer the relative or friend to one of the community agencies if the relative or friend wishes.

Services Provided

1. Nursing Stations/Hospitals:

   - medical treatment
   - be available 24 hours/day

2. RCMP Detachment:

   - investigate cases of spousal assault
   - lay charges on evidence against batterers
   - be available 24 hours/day

3. Social Services Offices:

   - provide counselling services
   - provide financial assistance
   - assist in locating emergency shelter
   - be available 24 hours/day, either through local social workers or a telephone line collect call to area and regional supervisors
   - preparation of information leaflet detailing resources of community agencies

SPOUSAL ASSAULT

INTER-AGENCY PROTOCOL

The agencies listed below agree to:

1. Provide services to spousal assault victims as detailed in the protocol;
2. Co-ordinate services between the undersigned agencies; and
3. Encourage community based support for dealing with spousal assault.

DATED at Yellowknife this 30 day of September, 1985.

Royal Canadian Mounted Police

Health & Welfare Canada

GNWT - Social Services

GNWT - Health

ISSUE PAPER: SAFE SHELTERS

Background: Shelter for the victims of spousal assault (and other forms of family violence) is currently seen by communities as possibly the most urgent requirement.

A safe place for victims to go where they can be assured of protection is imperative as a first step, whether or not reconciliation follows.

Ideally, when violence occurs it would be the offender who was removed from the family home. This is done whenever possible but is frequently impossible to enforce.

Consequently safety for the victims becomes a primary concern.

Needs for accommodation fall into two categories: emergency shelter and second stage (transition) housing.

1. Emergency Shelter:

All regions identify this as the most immediate need for a woman who has left an abusive spouse.

A number of communities do have some facility, run by either a volunteer organization or by the Department. For instance, Social Services in Fort Smith operates a Crisis Centre out of the Religious Education Centre, while in Inuvik the Department runs a Family Life Centre, which although not staffed as a Crisis Centre, does provide emergency shelter and supportive environment. In Yellowknife, transition accommodation is provided through the YWCA, and an effective network of volunteers who are prepared to open their homes in an emergency.

The problem is most serious in smaller communities, where accommodation is scarce, and where it is impossible for the victim's location not to be known to her spouse. This incurs considerable risk not only for the woman involved, but also for the people providing her shelter.

The need for Transition Homes in larger centres and some form of "Safe Homes" in smaller communities is expressed by a number of workers. There is however a strong feeling that these services are more effective when they result from community action rather than as a Social Service program.

2. Second Stage Housing and Relocation Services:

Provision of second stage housing is of major concern. There are a large number of cases where women wishing to leave their husbands have been unable to do so simply because they had no-

where else to live. This results in requiring the wife and children to continue in a potentially dangerous situation.

The shortage of housing is severe and widely known. Although not directly the responsibility of the Department of Social Services it does present major obstacles to successful relocation of the wife and children other than in the home of friends or relatives.

In some instances it is possible to find accommodation by relocating in another community. While this may meet the need for housing and protection from an abusive spouse, it often creates additional stresses by separating the woman from her home community and extended family.

For women from southern Canada such relocation is more viable as it can mean returning to family and social support groups.

Policies and procedures detailing the steps to be taken and are ensuring accommodation for the spouse with children are lacking at present.

The Housing Corporation and local Associations have often provided considerable assistance through modification of leases to assist abused spouses remain in the family home. The Territorial wide housing shortage however does significantly impede efforts to help families in crisis.

Action Plan:

In order to meet the varying needs of communities and individuals, several levels of service are required.

It is essential that there be a safe place in each community where a woman and her children can go immediately to escape from a threatening situation. This need only be a room in a "safe home" where they can obtain shelter.

In addition to this, in larger centres it is necessary to provide not only crisis accommodation for local residents, and to women from nearby communities who are ready to leave, but also to provide transition accommodation for women and their children who are attempting to make a permanent break, who need medical or counselling services, or who require legal advice. Only a small number of those facilities will be necessary, but they are essential - the need is already well documented in several communities and major volunteer effort is required to identify community alternatives.

A multi-level approach responding to varying community needs has been proposed.

Purpose: 1. To provide community level crisis shelter to victims of spousal assault; 2. To facilitate development and provide support for transition housing in selected regional centres.

1. The Department of Social Services proposes to identify, where possible, a home in each community which will provide one or two bedrooms which could be retained for crisis shelters. This would be done in various ways avoiding the need and availability of housing.

   (a) In relevant communities, four bedroom housing units built by the NWT Housing Corporation would be allocated to a couple on the understanding that two rooms would be rented by Social Services for use as emergency accommodation as required.

   (b) In communities, where **private** housing was available, a couple would be paid a retainer to keep one or two rooms free and would be paid a per diem when the rooms were occupied.

   Proposed payments:

   Retainer - $900.00 per annum
   Per Diem - $ 30.00

2. The need for transition shelter has been best established and documented in Yellowknife and Frobisher Bay.

   In both communities strong volunteer groups have developed proposals for operating shelters and turn key programs for battered spouses.

   In Frobisher Bay the Aqvvik Society is also seeking funding through CMHC but as this may not be possible, capital funding ($300,000) is budgeted in Social Services 1986/87 capital plan. Operating funds for this facility (approximately $300,000 - excluding amortization of mortgage, if required) are included in the main estimates.

   Funding is in place for a multi-purpose facility within the Department of Social Services for the Kitikmeot Region (Coppermine) to serve families in need.

   Fort Smith and Inuvik are two of the major centres currently providing shelter, but in a less organized fashion. In Fort Smith services are being provided through the Roman Catholic church. However, it is anticipated that these services will not be able to be continued, and in that case funds would be needed to provide shelter. In Inuvik funding will be required to provide staffing for the crisis home which is not secure at present. It is anticipated that operational funding for staffing, programming, and general O & M will be required by 1987/88.

Financial Implications:

	1986/87	1987/88	1988/89
Community Safe Home	180,000	260,000	on-going
YWCA	420,000	340,000	"
Other Regional Centres (2) (Fort Smith/Inuvik)	600,000	500,000	"
TOTAL: $2,300,000			

These costs are approximate and do not include the money already included in Social Services Main Estimates for operation of the Frobisher Bay Shelter.

ISSUE PAPER: COMMUNITY ACTION GROUPS

Background: Spousal assault is seen as a community as well as a family and individual problem. If long-term solutions are to be found they will be within the community, utilizing local resources.

With the wide differences between communities it is apparent that no single solution to the problem of family violence will work in all cases. Each community has different needs and different strengths and will require different approaches.

No uniform government-developed program however well-intentioned imposed on communities is likely to succeed.

Solutions must be "custom-made" and community members must be given support and training to enable them to develop and implement their own programs.

Action Plan:

1. In 1985/86 funding for community groups was made available through contribution funding from the Women's Secretariat. (See Appendix "A".)

2. The Department of Social Services is currently reviewing the role and function of community committees. As a supplement to this a policy regarding the funding and training of **volunteer** community groups is to be developed to respond to spousal assault and will be developed by the end of 1986/87.

3. Funding, if approved, will be provided through the Department of Social Services for the training of volunteers.

4. The Department of Social Services will assume responsibility for fostering community activities. Groups will be encouraged to seek funding through available Federal sources.

Available Federal funding initiatives:

(a) SECRETARY OF STATE:

Funds available for conferences or workshops that would study the recommendations in the Task Force Report and/or develop strategies.

Also, funds to send a community person or two out for training on victim or batterers counselling, primarily if they work in the field.

(b) FEDERAL JUSTICE

The Victims Initiatives Fund has money for projects such as training volunteers and counselling of victims from the time of reported assault to through the court hearing. They want to see a demonstration of new approaches.

They could be interested in workshops on the courts and the legal system.

Another area they are interested in is the training of mental health paraprofessionals to work with victims or batterers.

Criminal Law Reform Fund would entertain proposals that would test changing the law; through discussion with experts (probably workshop style) or experimental projects to test proposed changes.

(c) HEALTH AND WELFARE

Interested in a pilot project that could demonstrate the process of implementing a program. One area they mention specifically is that of providing information to communities. Testing of these methods would have to be incorporated. An applicant would have to be aware of what is being used elsewhere and demonstrate why they need to explore other methods. For the NWT, it could involve using different languages, Anik Info Newsletters, public available media. They want to see different techniques used and compared to one another.

Some of the categories for Health and Welfare apply to government or agencies.

Financial Implications:

	1986/87	1987/88	1988/89
Grants & Contributions	155,000	155,000	155,000

TOTAL: $465,000

(P.Y. and salary will also be required but this is incorporated under Issue Paper #7 - Social Services Policy/Program Development)

ISSUE PAPER: COUNSELLING FOR BATTERERS

Background: While services to the victim(s) of assault are of primary importance, consideration must be given to the treatment of the offender if the cycle of abuse is to be broken.

Even in situations where the wife leaves her battering husband and the offender is incarcerated, the cycle often repeats itself: the offender, on release, may enter other relationship with a different women and is soon involved in the same pattern of violence with this new family unit.

While it is essential that social sanctions are applied to the batterer - that such unacceptable behaviour is punishable - there is no evidence to assume that, for the majority of cases, such punishment alone results in any significant behavioural change.

There is a growing body of knowledge and experience regarding effective treatment of batterers, whether within or outside correctional facilities.

At present no specific programs are provided within correctional facilities in the NWT, and it is unlikely that such programs could be provided in the immediate future given the availability of staff.

Further, given that almost all inmates of Territorial facilities are sentenced to less than 2 years, the opportunities for conducting an effective therapeutic program are minimal.

There are no real resources in the NWT available for men, or women, who behave violently towards their spouse and wish to stop. Treatment programs in other parts of the country have yielded varying degrees of success, and controversy exists as to whether and under what circumstances counselling, anger control therapy, and other forms of treatment, are effective.

In the NWT, treatment for batterers, as a Mental Health Service, can be viewed as a responsibility of Health and Welfare Canada. However, it can with equal validity be seen as part of Correctional Programs within the Department of Social Services.

Anger control therapy as a sentencing option would most logically be administered within or as an adjunct to incarceration at Yellowknife Correctional Centre. As such, the Department of Social Services would be directly responsible for provision of such a program.

Traditionally, the courts pay for court-mandated treatment (investigative tests, etc.), not the Department of Health.

Counselling for batterers requires special training by professionals. It is not something to be undertaken by community volunteers. It is unlikely therefore that community intervention in small, remote, NWT communities could ever be financially feasible. Such rehabilitation will have to be a regional service, possibly associated with the correctional facilities in Yellowknife and Frobisher Bay.

Action Plan:

1. Anger Control Therapy may be included in the plan for co-ordinated mental health services currently being developed by the Mental Health Committee (comprises of representatives from Departments of Social Services, Health and Education, Health and Welfare Canada, Medical Services Branch and Stanton Yellowknife Hospital). The first draft of this proposal will be available early in the new fiscal year.

2. In the interim the Department of Social Services with the Department of Health, has assumed the responsibility for initiating the assessment/pilot project immediately as funds become available.

   This project will consist of assessment of:

   a) extent and distribution of need;
   b) evaluation of applicability of various treatment modalities for the NWT; and
   c) initiatives of pilot project.

   in a selected community/location.

Financial Implications:

1986/87	1987/88	1988/89
150,000	100,000*	100,000*

TOTAL: $350,000

* Costs are estimates and will be more readily determined on completion of the assessment project in 1986/87.

Press Release Outling One Treatment Option:

YUKON PROGRAM FOR BATTERERS SEEN AS MODEL FOR NWT

YELLOWKNIFE (Sept. 10) - A Yukon program that offers treatment to men who batter their partners could provide a model for a similar service in the NWT.

That suggestion comes from Paula Pasquali and Christine Mullin, two Whitehorse therapists who recently presented a workshop on spousal assault for the Tawow Society in Fort Smith.

Pasquali and Mullin, who run both a support group for battered women and the men's treatment program, work from the premise that violence is "a learned response to stress". This means that batterers can learn new ways of coping with tension in their lives.

Their treatment program, which is funded by Health and Welfare Canada and the Yukon Department of Health and Human Resources, accepts men who enrol on their own and those who are sentenced by the courts. As a rule, men who are referred by the courts are more committed and successful than those who attend voluntarily. Although the weekly sessions are held in Whitehorse, transportation is provided by Probation Services for clients from outlying communities.

One of the goals of treatment is to help the men become more aware of their own feelings. "Men who batter usually aren't aware of a very wide range of emotions," Mullin points out. "Either everything is great, or it isn't". This means they don't notice the warning signs that might tell them they're in danger of committing an assault - signs like slamming doors, tightness in the chest, angry "self-talk".

When a man is able to see that he is in danger of committing an assault, he is taught to take "time-out". This simply means going out for an hour or so, with no drinking or driving, and doing something physically exhausting. "We have to bend the rules when it's minus 40 out! We just ask them to stay away as long as possible."

Those who try this technique finds it works, but Mullin and Pasquali admit that many of their clients won't use it. "They may be afraid that the woman will leave while they're gone; some are worried about being seen as cowards if they walk away from a fight."

The two therapists admit that working with batterers is "tricky", partly because attitudes that permit violence against

women are strong in popular culture. They offer examples of rock songs in which women are seen as possessions of men who really don't mind being abused.

Mistaken ideas about spousal assault are widespread and make it difficult for individuals and communities to deal effectively with the issue, the two therapists maintain.

One of the most damaging myths is that women who are beaten somehow deserve the abuse, Pasquali says. "Our basic premise has to be that the victim is not to blame. No matter what you do, you do not deserve to be assaulted. Assault is a criminal offense."

"Violence is a problem in the assaulter - a pattern he has learned that he will likely recreate in any intimate relationship unless he gets help." If there are interpersonal problems in the relationship they cannot be corrected until the assaults end, the therapists say.

Pasquali is currently chairing the Yukon government's Task Force of Family Violence, on which Mullin also serves as a member.

ISSUE PAPER: SOCIAL SERVICES POLICY/PROGRAM DEVELOPMENT

Background:

1. Principles for policy/program development:

In outlining the position of the Department of Social Services the following principles are used:

1. Family violence cannot be seen as an acceptable form of interaction in any culture. Nobody deserves beating.

2. The family as a unit is to be respected, and services should be first directed towards preventing abuse and the breakdown of this unit.

3. When violence does occur services should be directed towards protection of that portion of the family that remains as a viable unit.

4. Protection (safety and security) of victim(s) or potential victim(s) must be the prime consideration.

5. Services should be directed towards rehabilitation and reconcilation, as well as punishment of the offender.

6. Services should be directed towards enabling families and communities to help themselves rather than becoming dependent on Government or other agencies.

The Department of Social Services:

1. Supports the principle of **community-based solutions to the spousal assault problem** and encourages the provision of **spousal assault-related services** through local community groups wherever possible.

2. Recognizes the importance of **assessing the needs of convicted batterers** for rehabilitation.

3. Encourages the inclusion of **training in family violence** cases in the Social Worker Programs at Thebacha College and Eastern Arctic College.

4. Recognizes the needs of spousal assault victims and their families for temporary **financial assistance** and assistance with transportation and day-care costs.

5. Supports the development of community-initiated **shelters** for spousal assault victims, and the availability of **counselling** at all shelters.

6. Supports **in-service training** for Social Services staff in dealing with spousal assault cases is supported by the department.

7. Supports the idea that every spousal assault victim should have access to some type of support 24 hours a day.

8. Encourages the development and continued operation of an **interagency referral system** in each community.

2. Services Currently Available:

Although few services are formally provided by the Department of Social Services, there is a strong, and growing awareness of the problem.

Many workers provide a variety of services to victims and, in some cases, offenders. As yet, however, there are not many formal procedures established.

Services provided, formally or informally by the Department include:

- Relocation assistance
- Emergency shelter (usually in nursing stations, or through community groups or family members)
- Emergency financial assistance
- Offender services
- Victim counselling
- Marriage/family counselling
- Individual counselling
- Victim advocacy
- Provision of "safe" house
- Referral to legal aid/native court workers
- Referral to other professionals

The type and extent of service other than statutory services, depends on the skills of individual workers, the availability of resources, and community involvement.

There is no consistency in the level of service available, but a wide recognition that more is needed. Community Social Service Workers across the Territories express the desire to do more but tend to feel overwhelmed by either the extent of the need, their own limitations, or the unwillingness of the community to come to them for help other than Social Assistance.

In general terms, the Department of Social Services provides or will arrange to provide, the following services:
- assessment of batterers;
- funding for appropriate shelter;

- in-service training for spousal assault;
- referral information sheets and up-dated information for each community;
- financial assistance to victims and their families;
- assistance in locating emergency shelter;
- counselling services;
- 24 hours a day on-call response either through CSSW's or a collect telephone call to area and regional supervisors.

3. Gaps in Services Provided:

While there is a sincere effort on the part of workers to provide help for the victims of spousal assault, there is a recognition that the help provided falls far short of meeting the need.

The major deficiencies identified (other than in the areas of Justice and Police activities) occur in the following areas:

1. Emergency shelter
2. Second-Stage housing and relocation services
3. Day-care
4. Counselling services
5. Therapeutic services
6. Public awareness/education
7. Policies and Procedural Guidelines
8. Training for Social Service Workers
9. Services for the offender

4. Policies and Procedural Guidelines:

A frequently expressed concern regards the absence of clearly articulated policies and procedures for the provision of services to the victims of family violence.

In the absence of established practices, and without experience in the area, workers are unsure not only of their own mandate, but of available alternatives for action. Problems occur especially in the area of Financial Assistance. This has been partially remedied with the insertion in the Social Assistance Manual of an instruction regarding the eligibility of battered wives for emergency financial assistance. More policy and procedural guidelines are however required, not only for the provision of Financial Assistance, but also for Family and Children's Services.

In the area of Financial Assistance, better defined policies are required not only to ensure the financial security of the wife and her children, but also to cover issues such as disposition of assets by the offender and payment of child support.

5. Training for Social Service Employees:

Perhaps the single most important need expressed by Social Services Personnel is for training, especially for field workers.

Training is required at a number of levels, including:

- General information regarding the nature of family evidence - its causes, prevalence, dynamics and services available.
- Knowledge of the rights of victims and their possible courses of action.
- Family counselling techniques for working with troubled families either before or after violent episodes. This needs to include the ability to recognize a family in trouble and to identify possible sources of assistance.
- Individual counselling for wives, children, and (potential) offenders. This is extremely sensitive and should primarily focus on funding professional assistance.
- Community animation - how to work with a community to help members see problems present within it, to determine possible courses of action, and to take positive steps in helping solve their own problems.

This represents an ambitious program, but, given the reality of the North, and demands placed on Social Service Workers, it is essential that they be provided with on-going training to assist them in coping with the problems with which they are faced daily.

6. Summary:

It is evident that the primary role for any long term intervention in the problems of family violence belongs to the Department of Social Services. It will be necessary to develop a comprehensive policy acceptable to the Government as a whole; to develop programs within the policy guidelines and to provide training for field staff, community groups and volunteers.

Specific tasks include:

i) Development of policy and procedural guidelines;
ii) clarification of Social Workers' duties and responsibilities under existing law;
iii) Development and delivery of in-service training for workers;
iv) Initiation and co-ordination of interagency response co-operation;
v) Facilitation of community-based programs.

Action Plan:

1. Actions taken:

- Development of Interdepartmental working group
- Development of interagency protocol
- Revision of Social Assistance Program manual to ensure immediate financial assistance is provided to victims.

2. Possible courses for future action:

In consideration of the problem as well as the perceived needs for, and gaps in, services, the following activities are proposed as steps which could be taken by Social Services towards alleviating the current situation.

i) Development of a comprehensive policy for responding to spousal assault and a policy for family violence.

ii) Maintain the lead role in the interdepartmental working group to ensure continuation of co-ordinated efforts to alleviate the problems of spousal assault, and to ensure effective implementation of the protocol.

iii) Investigation by the Department of Social Services regarding options for providing training to community social service workers to develop family and individual counselling skills, community animation skills, and general knowledge regarding family violence. An on-going training program should be established as a priority.

iv) For Department of Social Services and other government personnel to work closely with community groups to assist them in the heightening of awareness regarding spousal assault and other forms of family violence.

v) For Department of Social Services staff to work closely with community groups and individuals to assist them in the development of community based programs and services. These services could include volunteer housing for victims, development of a crisis line, development of a "response team" comprised of volunteers and professionals, etc.

vi) In revision of its current legislation the Department of Social Services should include specific reference to protection of, and services for, victims of family violence.

vii) For the Department of Social Services to review its departmental policies and operating procedures to ensure that actions which can be taken by workers, and options available to them, are clearly investigated. This should include procedures regarding protection of victims and provision of financial assistance and emergency shelter as well as long-term solutions.

viii) For the Department of Social Services to provide support to communities to identify resources available within the community for the provision of services to victims of family violence. This is absolutely essential. Until there is a recognition within a community of the problem, and the feeling of a need to do something about it, it is highly unlikely that any intervention programs will have any real success. For long term gains, communities should develop their own resources and maintain as much independence from Social Services as possible.

ix) For a directive to be established whereby Correctional Superintendents alert Probation Officers on the release of a person convicted of spousal assault. The Probation Officer can then monitor the situation to help minimize risk of a subsequent assault.

x) Development and delivery of training packages for field staff and volunteers.

Proposal:

Hire on a two year term-basis a Co-ordinator to develop the Government policy, to initiate training development and to develop action plans to ensure completion of activities above.

Policy and action plan to be developed by summer of 1986.

Training modules developed piloted in 1986/87.

Financial Implications:

	1986/87	1987/88	1988/89
Salary/Benefits	50,000	50,000	-
Training	75,000	90,000 *	90,000 *

TOTAL: $355,000

* Preliminary Estimates

APPENDIX "A"

1985/86 CONTRIBUTION FUNDING TO WOMEN'S SECRETARIAT	$200,000.00
1. **SAFA, Yellowknife** - Conference on Family Violence	16,627.00
2. **Baffin Regional Agvvik Society, Frobisher Bay** - Towards the development of a Transition House and a conference on Family Violence	46,300.00
3. **YWCA, Yellowknife** - To hire a cross-cultural researcher and a pre-operation coordinator towards the development of a Transition House	20,160.00
4. **Mental Health Association, Inuvik** - For a study on the feasibility of having a crisis centre in the region	24,342.00
5. **Katimavik Centre, Cambridge Bay** - A workshop on counselling techniques, anger control therapy	8,590.00
6. **NWT Native Women's Association, Yellowknife** - Contribution for 7 people to attend SAFA Conference	2,505.00
7. **Substance Abuse Committee, Fort Providence** - 2 workshops for professionals and public; counselling techniques, understanding spousal assault	4,000.00
8. **Tawow Society, Fort Smith** - to hire a part-time person to assist with the Crisis Centre and seek an alternate facility	9,000.00
9. **Katauyak Society, Rankin Inlet** - to prepare a booklet outlining rights of battered persons and resources available in the Keewatin Region	3,540.00
10. **T'seko Nezi Geeda Giwo, Rae-Edzo** - to hire a part-time counsellor for abused women, liaise with local agencies and groups, provide support and information	6,300.00

APPENDIX "A"

1985/86 CONTRIBUTION FUNDING TO WOMEN'S SECRETARIAT	$200,000.00
11. **Mental Health Association, Inuvik** - workshop with people who run batterer's programs	2,500.00
12. **Inuvialuit Social Development Fund, Inuvik** - workshops on family violence, anger control	10,610.00
13. Community Workers hired - salaries/travel	45,000.00
	$199,474.00